

THE SCOTTISH OFFICE

Department of Health

NHS

MEL (1998) 78

NHS Management Executive St. Andrew's House Edinburgh EH1 3DG

15th December 1998

Dear Colleague

REPORT OF THE HEALTH SERVICE COMMISSIONER

Summary

This letter covers the report of the Health Service Commissioner's investigations completed during the period April to September 1998. The report should be distributed widely and used by all Health Boards and NHS Trusts to review performance and take remedial action as required.

Action

- 2. Enclosed are:
 - the Health Service Commissioner's first report for session 1998/99; containing a selection of 11 of the 33 investigations completed between April and September 1998;
 - epitomes of the selected cases. 2.2
- Board General Managers and Trust Chief Executives are 3. asked to:
 - circulate the report as widely as possible; 3.1 particularly drawing it to the attention of staff involved in administering the complaints procedure;
 - the Health Service Commissioner's reports are 3.2 available on the Internet www.ombudsman.org.UK
- The Annex attached brings to your attention issues which 4. the Commissioner thought of particular importance.

Yours sincerely KEVIN WOODS

Addressees

For action: General Managers, Health Boards Chief Executives, NHS Trusts General Manager, Common Services Agency General Manager, State Hospitals Board for Scotland

For information: (Epitomes only) Chief Executive, Health Education Board for Scotland Executive Director, Scottish Council for Postgraduate Medical and Dental Education Chief Officers/Secretaries, Local Health Councils Deans of Medical Faculties

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- 1. ISSUES ARISING FROM THE HEALTH SERVICE COMMISSIONER'S REPORT
 - 1.1 The Health Service Commissioner's Office received a record 1,575 complaints in the first half of 1998-99, however many of those complainants wrote without first having made their complaints through the NHS complaints procedure.
 - 1.2 The number of investigations completed by the Commissioner was lower than in previous six monthly reports, largely because the first group of clinical cases have taken longer to investigate than cases alleging maladministration since they were breaking new ground and required new working procedures within the Commissioner's Office.
 - 1.3 This report includes for the first time reports of investigations about clinical matters in hospitals. In arriving at his findings in these cases, the Commissioner has based his findings on whether what happened was within the bounds of reasonable care in the circumstances at the time taking into account the shortages of resources and the stress under which many hospital staff work.
 - 1.4 The Commissioner has been encouraged to see lessons from complaints to him about the operation of the NHS complaints procedure reflected in training and networking sessions.
 - 1.5 Although the Commissioner reserves the right to name individual GPs and dentists complained against, he continues to identify only the health authority/health board areas in which the practitioner worked in this report.